

APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type:: Regular
Subject Matter:: Utility
CD-ROM or CD-R?:: None
Title:: METHODS AND APPARATUS FOR PROVIDING
PRINTING SERVICES BY ASSIGNING A TELEPHONE
NUMBER TO A PRINTER
Attorney Docket Number:: EFI-209
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure:: 1
Total Drawing Sheets:: 1
Small Entity?:: No
Petition Included?:: No

APPLICANT INFORMATION

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Israel
Status:: Full Capacity
Given Name:: Ofer
Family Name:: Tenenbaum
City of Residence:: San Jose
State or Province of Residence:: CA
Country of Residence:: United States
Street of Mailing Address:: 21450 Chona Court
City of Mailing Address:: San Jose
State or Province of Mailing Address:: CA
Country of Mailing Address:: United States
Postal or Zip Code of Mailing Address:: 95120

Applicant Authority Type:: Inventor
Primary Citizenship Country:: United States
Status:: Full Capacity
Given Name:: John
Family Name:: Armstrong
City of Residence:: Half Moon Bay
State or Province of Residence:: CA
Country of Residence:: United States
Street of Mailing Address:: 393 Saint Andrews Lane
City of Mailing Address:: Half Moon Bay
State or Province of Mailing Address:: CA
Country of Mailing Address:: United States
Postal or Zip Code of Mailing Address:: 94019

Applicant Authority Type:: Inventor
Primary Citizenship Country:: United States
Status:: Full Capacity
Given Name:: Brian
Family Name:: Horner
City of Residence:: Berkeley
State or Province of Residence:: CA
Country of Residence:: United States
Street of Mailing Address:: 2796 Grant Street
City of Mailing Address:: Berkeley
State or Province of Mailing Address:: CA
Country of Mailing Address:: United States
Postal or Zip Code of Mailing Address:: 94703

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 20028
Phone Number:: (203) 459-0200

Fax Number:: (203) 459-0201
E-Mail Address:: barry@patlawfirm.com

REPRESENTATIVE INFORMATION

Representative Customer Number::	20028	
----------------------------------	-------	--

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	an application claiming the benefit under 35 USC 119(e)	60/450,654	02/28/03

ASSIGNEE INFORMATION

Assignee Name:: Electronics for Imaging, Inc.
Street of Mailing Address:: 303 Velocity Way
City of Mailing Address:: Foster City
State or Province of Mailing Address:: CA
Country of Mailing Address:: United States
Postal or Zip Code of Mailing Address:: 94404